



03/25/09

IFW
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Atty. Dkt. No. 093397-0401

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Geoffrey W. Krissansen

Title: CANCER THERAPY

Appl. No.: 10/014,887

International Filing Date: 6/14/2000

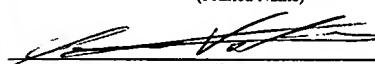
371(c) Date: 12/11/01

Examiner: Lei Yao

Art Unit: 1642

Confirmation Number: 2382

RECEIVED
MAR 31 2009
OFFICE OF PETITIONS

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
EM 200054070 US (Express Mail Label Number)	3/23/2009 (Date of Deposit)
OSCAR Valdivia (Printed Name)	
 (Signature)	

CHANGE IN STATUS TO LARGE ENTITY
AND SUBMISSION OF FEE DEFICIENCY

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicants submit herewith a request to change the status of the above-identified application to Large Entity; and payment of the fee deficiency for the change from Small Entity to Large Entity. In accordance with 37 CFR § 1.28(c), the erroneous assertion of small entity status and payment of small entity fees upon the filing of the application were done in good faith, and without deceptive intent. The deficiency in payment is calculated in the tables below:

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960.00 OP

**Supplemental Amendment to Final Office Action and Request For Continued Examination
fees paid at time of filing (October 21, 2008):**

	Claims As Amended	Previously Paid For	Extra Claims Present	Rate	Additional Claims Fee
RCE Fee				\$810.00	= \$810.00
1.17(e):					
Total Claims:	33	- 88	= 0	x \$52.00	= \$0.00
Independent Claims:	3	- 5	= 0	x \$220.00	= \$0.00
				CLAIMS FEE TOTAL	= \$810.00
[X] Extension for response filed within the third month:				\$1,110.00	\$0.00
				EXTENSION FEE TOTAL:	0
				CLAIMS & EXTENSION FEE TOTAL:	\$1920.00
[X]				Small Entity Fees Apply (subtract ½ of above):	\$960.00
[X]				Supplemental Information Disclosure Statement - 1.17(p):	\$0.00
				TOTAL FEE:	\$960.00

Fees that were due at time of filing:

	Claims As Amended	Previously Paid For	Extra Claims Present	Rate	Additional Claims Fee
RCE Fee				\$810.00	= \$810.00
1.17(e):					
Total Claims:	33	- 88	= 0	x \$52.00	= \$0.00
Independent Claims:	3	- 5	= 0	x \$220.00	= \$0.00
				CLAIMS FEE TOTAL	= \$810.00

[X] Extension for response filed within the third month:	\$1,110.00	\$0.00
EXTENSION FEE TOTAL:		0
CLAIMS & EXTENSION FEE TOTAL:		\$1920.00
[] Small Entity Fees Apply (subtract ½ of above):		\$0.00
[X] Supplemental Information Disclosure Statement - 1.17(p):		\$0.00
TOTAL FEE:		\$1920.00

Further, to place this paper in compliance with 37 CFR § 1.28(c)(2)(ii), the deficiencies in payment are itemized below:

Type of Fee	Small Entity Fee Paid 10/21/08	Large Entity Fee Due	Amount of Deficiency
Request For Continued Examination (RCE) Fee 1.17(e):	\$405.00	\$810.00	\$405.00
Extension for response filed within the third month:	\$555.00	\$1,110.00	\$555.00
		Total Deficiencies Paid with this Submission =	\$960.00

A credit card payment form in the amount of \$960.00 to cover the above-identified deficiencies in fees paid October 21, 2008 is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card

transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Date March 23, 2009

FOLEY & LARDNER LLP
Customer Number: 38706
Telephone: (650) 251-1129
Facsimile: (650) 856-3710

Respectfully submitted,

By Antoinette F. Konski

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